

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMC -		2/29/01
O.I.P.E. CLASSIFIER		10	3/10/00
FORMALITY REVIEW	UIMD-108237	5.1.00	
RESPONSE FORMALITY REVIEW		6/10/01	5/18/00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	2/29/01
2	✓	✓	2/29/01
3	✓	✓	2/29/01
4	✓	✓	2/29/01
5	✓	✓	2/29/01
6	✓	✓	2/29/01
7	✓	✓	2/29/01
8	✓	✓	2/29/01
9	✓	✓	2/29/01
10	✓	✓	2/29/01
11	✓	✓	2/29/01
12	✓	✓	2/29/01
13	✓	✓	2/29/01
14	✓	✓	2/29/01
15	✓	✓	2/29/01
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32	✓	✓	2/29/01
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36	✓	✓	2/29/01
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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